## PART B - FEE(S) TRANSMITTAL

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23522 17590 1172172011 MERCHANT & GOULD PC P.O. BOX 2903 MINNEAPOLIS, MN 55402-0903				Certificate of Mailing or Transmission  I hereby certify that this Fee(a) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Ston ISSUF FBE address above, or being flacismile transmitted to the USPTO (5/11) 273-2855, on the date indicated below.					
				Casey J. Manthie			(Depositor's nem		
				any				(Signatur	
				20	Februar	2012	(electronic	cally) (Dat	
APPLICATION NO. FILING DATE			FIRST NAMED INVEN	ror	ATTORNEY DOCKET NO.			CONFIRMATION NO.	
10/590,429	05/28/2008		Zhenqian Hu		14618.0001USWO		iuswo	7067	
TITLE OF INVENTION:		CHANISM OF MANUA	LLY TIGHTENED DA	ILL CHUC	K				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV.	PAID ISSUE FE	E TOTA	AL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$870	\$300		\$0		\$1170	02/21/2012	
EXAMINER		ART UNIT	CLASS-SUBCLASS	<u>.</u>					
JANESKI, PAUL MARTENS		3726	279-062000						
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).  CR 1.363).  Change of correspondence address for Change of Correspondence Address for PIO/SB/123 batched.  The Address Fem PIO/SB/123 batched.  The Address indication for "Fee Address" indication form PIO/SB/12, Fee 0.342 or more recent) attached. Use of a Customer Number is required.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON			(1) the names of to agents OR, alter (2) the name of a registered attorney 2 registered patent listed, no name wi	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a nigle Imm (having as a member a registered attorney or agent) and the names of up to 1 registered attorney or agent, alternatively, 2 registered patent attorneys or agent. If no name is 1 insice, no name will be printed.					
PLEASE NOTE: Unl- recordation as set forth (A) NAME OF ASSIC	ess an assignee is ident in 37 CFR 3.11. Com GNEE	ified below, no assignee pletion of this form is NO	data will appear on to Ta substitute for filin (B) RESIDENCE: (G	he patent. I g an assignm CITY and ST	FATE OR COL	INTRY)		nonment has been filed	
Please check the appropri	iate assignee category or								
4a. The following fee(s):  ☐ Issue Fee ☐ Publication Fee (N ☐ Advance Order - #	h. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  \[ \begin{align*} \limits \text{ Acted is enclosed.} \]  \[ \begin{align*} \limits \text{ Acted is enclosed.} \]  \[ \begin{align*} \limits \text{ Payment by credit (ard. Form PTO-2038 is attached.} \]  \[ \begin{align*} \limits  Payment by credit in the required fee(s), any deliciency, or credit any overpayment, to Deposit Account Number 13-275. (enclose an entire copy of this ferm). \]								
5. Change in Entity Stat	s SMALL ENTITY stat	us. See 37 CFR 1.27.	☐ b. Applicant is n	o longer clai	ming SMALL	ENTITY s	tatus. See 37 Cl	FR 1.27(g)(2).	
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